(b) if so, the details thereof;

(c) whether the value of such degrees is negligent and if so, the reasons of awarding such degrees: and

(d) whether Government propose to take up the matter with the concerned Medical Colleges for necessary action and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA) : (a) and (b) Yes, Sir. Some of the Postgraduate medical courses being conducted in a few Non-Teaching Specialist ntitutions in Delhi are yet to be recognised by the Medical Council of India and he Government. These courses were started prior to the commencement of the Indian Medical Council (Amendment) Act, 1993, when there was no requirement For obtaining prior permission of the Central Government for starting a new rourse. There are also few courses run by University College of Medical Sciences, Delhi; Maulana Azad Medical College, New Delhi and Lady Hardmge Medical College, New Delhi for which the institutions concerned have already applied to the Medical Council of India for their recognition.

(c) A person having unrecognized degree/diploma qualifications, cannot get registration as an additional qualification under section 26(1) of the Indian Medical Council Act, 1956 (IMC Act, 1956) with the State Medical Councils or the Medical Council of India and further that he/she cannot serve as recognised teacher in Government hospitals/institutions of the country.

(d) As per section 11(2) of the IMC Act, 1956, an institution is required to apply to the Central Government for recognition of the medical courses conducted by it. The Central Government, after obtaining the recommendation of the Medical Council of India issues the necessary notification for inclusion of the said course in the Schedule to the IMC Act, 1956. The institutions which arc yet to obtain recognition of the courses conducted by them under section 11(2) of the IMC Act, 1956 and the affiliating University are advised from time to lime by the Medical Council of India for getting their courses recognised by the Central Government.

Increase in AIDS, TB and Malaria

3134. MISS MABEL REBELLO:

SHRI JANARDHANA POOJARY :

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether the incidence of AIDS, TB and Malaria is on the increase;

(b) if so, the details thereof for the last three years, State-wise;

(c) the details of programmes undertaken at National and State levels to contain the spread of these ailments, budgetary allocation made for each of the programme, with break-up of the contribution from Central Government and foreign donor agencies;

(d) whether it is a fact that allocations do not commensurate with the magnitude of these diseases, and ever lesser allocation is being made over the last three years; and

(e) if so, the details in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) The Statement-I indicating State-wise details of AIDS, TB and Malaria during last three years is enclosed. *(See* below).

(c) The details of programme undertaken at National and State Level to contain the spread of these ailments, budgetary allocations made for each of the programme, with the breakup of the contribution from Central Government and foreign donor agencies are given at Statement-II *(See* below)

(d) No, Sir.

(e) Does not arise.

Statement-I Statement indicating the number of reported AIDS, TB and Malaria cases during the last three years (i) AIDS CASES

SI. No.	State	2000	2001	2002
1.	A&N Islands	9	8	7
2.	Andhra Pradesh	485	732	1085
3.	Arunachal Pradesh	0	0	0
4.	Assam	62	30	24
5.	Bihar	38	63	28
6.	Chandigarh	114	189	223
7.	Dadra and Nagar Haveli	0	0	0
8.	Daman and Diu	0	0	0
9	Delhi	64	358	79
10.	Goa	10	46	49

SI. No. State	2000	2001	2002
11. Gujarat	245	877	770
12. Haryana	47	141	58
13. Himachal Pradesh	15	51	14
14. J&K	0	0	0
15. Karanataka	541	516	314
16. Kerala	56	105	0
17. Lakshadweep	0	0	0
18. Madhya Pradesh	294	139	182
19. Maharashtra	348	2728	2652
20. Manipur	364	307	205
21. Meghalaya	0	0	0
22. Mizoram	3	5	14
23. Nagaland	51	131	87
24. Orissa	52	28	0
25. Pondicherry	0	0	16
26. Punjab	31	4	92
27. Rajasthan	106	136	268
28. Sikkim	0	2	2
29. Tamil Nadu	4206	6484	3222
30. Tripura	0	0	5
31. Uttar Pradesh	93	202	343
32. West Bengal	0	668	205
33. Ahmedabad M.C.	0	189	78
31. Mumbai MC	0	0	1563
TOTAL :	7234	14139	11585

(ii) T.B. CASES

SI. No.	State	Year-wise No. of T.B . cases detected and put on treatment		
		2000	2001	2002
1.	A&N Islands	748	754	524
2.	Andhra Pradesh	87672	95909	100505
3.	Arunachal Pradesh	3525	2730	3123
4.	Assam	18845	20022	18038
5.	Bihar	41167	35272	37520
6.	Chandigarh	1249	1872	1727
7	Chhattisgarh	—	—	14295
8.	D&N Haveli	177	—	—
9.	Delhi	24105	26389	32604
10.	Goa	1858	2623	1138
11.	Gujarat	87561	72683	61415
12.	Haryana	24298	28323	31703
13.	Himachal Pradesh	10214	11283	12691
14.	Jammu and Kashmir	8127	9472	9142
15.	Jharkhand	577	44095	16336
16.	Karnataka	58640	20203	57276
17.	Kerala	21483	85766	23923
18.	Madhya Pradesh	74970	81672	48675
19.	Maharashtra	167990	57336	117554
20.	Manipur	2234	4527	5556
21.	Meghalaya	2017	1263	2730
22.	Mizoram	1172	1035	1456
23.	Nagaland	994	6839	933
24.	Orissa	18871	15847	27152
25.	Pondicherry	3224	27248	2541

SI. No.	State	Year-wise No. of T.B. cases detected and put on treatment		
		2000	2001	2002
26.	Punjab	29829	735	20000
27.	Rajasthan	68057	86197	93462
28.	Sikkim	1675	30898	1250
29.	Tamilnadu	74258	48623	80895
30.	Tripura	1993	178114	1032
31.	Uttar Pradesh	225907	45166	207670
32.	Uttaranchal	44	14681	14725
33.	West Bengal	82181	73275	81485
	TOTAL :	1145618	1116171	1129076

(iii) MALARIA CASES

Name of the States/UTs	2000 Malaria Cases	2001 Malaria Cases	2002(P) Malaria Cases
Anhra Pradesh	80557	57735	35498
Arunachal Pradesh	46165	56030	41855
Assam	84915	95142	86993
Bihar	9509	4108	2032
Chhattisgarh	359155	290666	235434
Goa	9164	12331	18618
Gujarat	36712	81347	80983
Haryana	1050	1202	934
Kimachal Pradesh	491	349	176
Jammu and Kashmir	3046	912	477
Jharkhand	133453	130784	125229
Karnataka	109118	197625	129305
Kerala	2940	2289	2985
Madhya Pradesh	194689	183118	106651
Maharashtra	81406	58043	45813
Manipur	1064	943	1268
Mehalaya	13699	20630	17916
Mizoram	9059	10929	6373

Name of the States/UTs	2000 Malaria Cases	2001 Malaria Cases	2002(P) Malaria Cases
Nagaland	3443	4318	3504
Orissa	50997	464541	458046
Punjab	493	604	203
Rajasthan	35973	129233	68051
Sikkim	15	31	53
Tamil Nadu	43053	31551	27337
Tripura	12245	16502	13322
Uttaranchal	2008	1196	1075
Uttar Pradesh	98971	94524	81018
West Bengal	145322	145059	181272
A&N Islands	1002	925	865
Chandigarh	256	298	157
D&N Haveli	2415	848	493
Daman and Diu	132	87	173
Delhi	2631	1484	694
Lakshadweep	6	0	8
Pondicherry	137	106	103
GRAND TOTAL	2931790	2085484	1772616

(P) Provisional

Statement-II

The details of programme undertaken at National and State levels to contain the spread of AIDS, TB and Malaria and break up of budgetary allocation and contribution from Central Government and foreign donors agencies AIDS

In order to prevent and control the spread of HIV/AIDS in India, Government has launched a comprehensive National AIDS Control Programme, currently under implementation throughout the country as a centrally sponsored scheme with the following components:—

- Preventive interventions for high risk populations through targeted interventions adopting a multi-pronged strategy including peer counselling and behaviour change communication.
- Preventive interventions for the geriaral population through programmes for blood safety, voluntary counselling and testing

services, prevention of parent to child transmission of HIV, Information Education and Communication (IEC) and awareness building among adolescents and sensitization for the AIDS vaccine Initiative.

- Provision of low cost care and support services by providing community care services, treatment of opportunistic infections and prevention of occupational exposure.
- Collaborative efforts to promote inter-sectoral programme activities including workplace interventions and public-private partnerships.
- Building technical and managerial capacities for programme implementation through Surveillance, Training, Monitoring and Evaluation, Technical Resource Goups, Operational Research and Programme Management.

The allocation made for the National AIDS Control Programme during last three years is indicated below :—

(Rs. in crores)

Year	Allocation	General Component	Externally Aided Component
2000-01	180.00	1.32	177.68
2001-02	229.70	1.26	227.46
2002-03	242.00	1.39	240.46

TB.

National TB Control Programme is in operation since 1962 in the entire country as centrally sponsored Programme. Under the Programme all diagnostic and treatment facilities including supply of anti-TB drugs for full course of treatment are provided to all TB patients free of cost.

To achieve a cure rate of 85% of new sputum positive cases and to detect at least 70% of such cases, Revised National TB Control Programme (RNTCP) widely known as DOTS, which is a WHO, recommended strategy, is being implemented in the country in a phased manner. More than 600 million populations has already been covered under the strategy. It is envisaged to cover 850 million populations by 2004 and the entire country by 2005. The Project Districts have reported a cure rate of more than 80% which means more than 8 out of every 10 patients diagnosed and put on treatment under the

revised strategy and successfully treated. To increase accessibility to the TB care facilities, emphasis is laid on involvement of NGOs, Private Practitioners and Medical Colleges in the revised strategy. To create mass awareness that TB is fully curable and that all diagnostic and treatment facilities including supply of anti-TB drugs for full course of treatment are provided free of cost to all TB patients under the Programme, IEC activities are undertaken at all levels.

The allocation made for the National TB Control Programme during last three years is indicated below:—

(Rs. in crores)

Year	Allocation	General Component	Externally Aided Component
2000-	125.00	22.00	103.0
01	136.00	6.00	0
2001-	115.00	6.00	130.0

Malaria

To contain the malaria situation, National Anti-Malaria Programme is being implemented throughout the country as an on going programme. For intensification of anti malaria activities, seven North Eastern States are being given 100% central assistance since December, 1994. Further, 1045 predominately tribal inhabited PHCs with high incidence of malaria in 100 districts of 8 States namely Andhra Pradesh, Gujarat, Chhattisgarh, Jharkhand, Madhya Pradesh, Maharashtra, Orissa and Rajasthan are being provided additional support since September, 1997 under the world Bank assisted Enhanced Malaria Control Project. The assistance provided during the last three years is as under:—

Year	Domestic Budget Support	Externally Aided Component	Total
1999-2000	Rs. 100.56	Rs. 60.65	Rs. 161.21
2000-01	Rs. 95.24	Rs. 81.26	Rs. 176.50
2001-02	Rs. 125.26	Rs.81.13	Rs. 206.39